ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	7.D		6.9.00
O.I.P.E. CLASSIFIER		8	6/9.00
FORMALITY REVIEW	AF	829	7/26/00
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✔	.... Rejected		N	.... Non-elected
=	.... Allowed		I	.... Interference
—	(Through numeral)... Canceled		A	.... Appeal
÷	.... Restricted		0	.... Objected

BEST AVAILABLE COPY

Claim (Final/Original)	✔	Date
1	✔	
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Claim (Final/Original)	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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